



County of San Diego, Planning & Development Services
APPEAL APPLICATION
ZONING DIVISION

APPEAL TO:

- ☐ Board of Supervisors
☐ Planning Commission
☐ Administrative Appeal
(Requires Deposit & [PDS-346](#))

FOR OFFICIAL USE ONLY

Code _____
Thomas Guide Map Fee Record ID

Community Plan Area

General Plan Designation

Zone

APPELLANT FILL IN BELOW THIS LINE, THIS SIDE ONLY – PLEASE PRINT OR TYPE

| | | | | | | |
|-------------------------|---------------|-------------|------------------|---------------|---------------------------------|--|
| Site Address | | | | | Assessor's Parcel Number | |
| <i>Number</i> | <i>Street</i> | <i>City</i> | <i>Zip</i> | | | |
| Appellant's Name | | | <i>Last</i> | <i>First</i> | <i>Middle</i> | |
| Owner's Name | | | <i>Last</i> | <i>First</i> | <i>Middle</i> | |
| Mailing Address | | | <i>Number</i> | <i>Street</i> | | |
| | | | <i>City</i> | <i>Zip</i> | | |
| Telephone | | | Telephone | | | |

REQUEST: Clearly define all items requested in the appeal. Submit plans if necessary, to illustrate request.

JUSTIFICATION: Attach additional sheets if necessary.

Signature of Appellant

If Company Officer – indicate Company Name and function
(Please print)



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